

**North Carolina Commission for Mental Health, Developmental Disabilities and Substance Abuse
Services
Advisory Committee Meeting Minutes
DoubleTree Hotel
1707 Hillsborough Street
Raleigh, NC
Thursday, January 23, 2014**

Commission Members Attending:

Anna Cunningham, Greg Olley, Amie Brendle, John Owen, Elizabeth Ramos, Tyehimba A. Hunt-Harrison, Ann Shaw, F. Michael Maybee, Marian S. Spencer, Nancy E. Moore, Peggy S. Terhune, Roger B. Moore, Jr., Don Trobaugh, Beverly M. Morrow, Kevin P. Oliver, David Turpin, John Emerson

Excused Absences:

Linda C. Warden

Division Staff:

Steven E. Hairston, W. Denise Baker, Marta T. Hester, Andrea Borden, Emery Cowan, Susan M. Kelley

Others Attending:

Sally Cameron

Call to Order:

The Advisory Committee was called to order by Anna Cunningham, Advisory Committee Chairperson, at 1:14 pm. Ms. Cunningham issued the ethics reminder.

Chairperson's Report: Finalize Mission Statement

Ms. Cunningham presented the handout on the Advisory Committee's Mission Statement and the goals and mission of the workgroups: Communication/Accessibility in Community Infrastructure and Public Services and Individual Rights and Quality MHDDSA Services.

Upon motion, second, and unanimous vote, the Advisory Committee approved the mission statement as written.

Ms. Cunningham asked Dr. Greg Olley, Chairman, NC Commission for Mental Health, Developmental Disabilities and Substance Abuse Services (NC DMH/DD/SAS), to briefly discuss the need and opportunity for the Advisory Committee to work on some related issues involving rulemaking with the Rules Committee. Ms. Cunningham indicated the Committee will need to prioritize its activities and decide where rulemaking should be placed on its working matrix.

Presentation on Supportive Employment

Emery Cowan, Adult Mental Health & Employment Services Lead, Best Practice and Community Innovations Team, Community Policy Management Section, NC DMH/DD/SAS, presented a powerpoint presentation on *Transitions to Community Living Initiative: Services and Supports*. Ms. Cowan's presentation discussed the guiding principles of the NC Settlement Agreement with the NC Department of Justice based on the Americans with Disabilities Act (ADA) and the Olmstead Act. The federal focus on the ADA and Olmstead affects the full Adult Mental Health service array. Ms. Cowan emphasized the role and importance of evidence-based practices and program fidelity. She indicated that Supported Employment (SE) is often the trigger for people's recovery. Evidence-based supported employment is referred to as Individual Placement and Support (IPS), which is an evidence-based approach to supported

employment for people who have a severe mental illness or co-occurring disorders. IPS was developed by Dartmouth Psychiatric Research Center. Ms. Cowman also noted that although Dartmouth calls supported employment IPS, some states simply refer to it as employment or supported employment; however, the key difference is the integration of behavioral health (supportive employment and mental health teams working side by side).

Ms. Cowan received the following questions and comments from Advisory Committee members:

- Michael Maybee asked if all models use peer support. Ms. Cowan responded no.
- Another Commission member questioned how realistic it is for an individual to be seen immediately by a doctor if they begin hallucinating on the job (since Ms. Cowman indicated a team was already in place). Ms. Cowan advised that it will vary.
- Mr. Maybee advised that he and his agency have been involved for years in supported employment services; however, it is easier to place people in the smaller, rural communities because of the interconnectivity within the community. He also mentioned people with substance abuse issues are required to have a post employment screening because of problems which may arise if they are actively abusing a substance on the job.
- Don Trobaugh questioned how many agencies were involved in helping to implement, and place people in, supported employment. Mr. Maybee said it has been done in NC for 25 years through vocational rehabilitation providers; however, NC DMH/DD/SAS is now coming on board because of the DOJ settlement. Ms. Cowan said it was a new initiative for mental health.
- Ms. Cunningham asked if any preliminary data was available on the peer support element which was added to see what areas of a person's life are being evaluated and affected. Ms. Cowan responded that data should be available by July.
- John Owen questioned if the program is working with the Division of Vocational Rehabilitation (VR), as he advised VR does not have a successful track record of working with individuals with mental health problems. Ms. Cowan responded that they are trying to train VR to help change their mindset to ensure the program's success in the area of supported employment. Mr. Owen also expressed his concern that the lack of step down services may lead to gaps in services and in individuals with mental health issues working and the possibility of losing Social Security Disability Insurance (SSDI). Ms. Cowan acknowledged there are gaps in services and advised evidence based practices are being examined to address some of the outstanding issues.

Presentation on the Different Roles in the System of Care from the Licensed Independent Professional Perspective: Highlights and Gaps in Services

Sally Cameron, Executive Director, NC Psychological Association, and Chairperson, Professional Association Council (PAC), presented a PowerPoint presentation on *Licensed Independent Professional and the Public MH/DD/SA System*. Ms. Cameron advised that PAC was established in 2000-01 to ensure licensed behavioral health professionals continue to play a role in the public mh/dd/sas system. As part of the presentation, Ms. Cameron discussed PAC's goals; the role of the licensed independent professional in the public mh/dd/sa system; steps being taken to move forward; workforce development needs; and moving the system forward to fill gaps in services. Although she presented survey data which revealed experienced providers leaving the system due to the excessive amount of paperwork required, low Medicaid reimbursements rates, etc.; she did note some progress is being made.

Ms. Cameron received the following questions and comments from the Advisory Committee:

- W. Denise Baker, Team Leader, Division Affairs, Operations Support Section, NC DMH/DD/SAS, asked if there is a commonly accepted definition for “licensed independent professional practitioners”. Ms. Cameron responded that the professionals are licensed under NC General Statutes and are listed under PAC. There are licensed professionals working within the public sector and independent licensed practitioners working within private practice.
- In response to Dr. Marian Spencer’s question, Ms. Cameron said she understands some states are being reimbursed by the Centers for Medicare and Medicaid (CMS) for training efforts, which would help in the area of workforce development.
- Ms. Cunningham asked if the Association has oversight function and how they encourage coordination of care. She also asked about monitoring tools and Ms. Cameron responded that Mary Tripp, NC DMH/DD/SAS, is leading the initiative to create the oversight body and appropriate monitoring tools.
- Mr. Owen mentioned there is a gap in services involving some of the providers staffing their offices to provide services for clients who have Medicaid and Medicare. He added that a system should not be planned around Medicaid because not everyone is eligible to receive it and it also creates a system that generates crisis.

Old Business:

Ms. Cunningham asked Dr. Tyehimba Hunt-Harrison to add information under the Mission Statement from the Individual Rights and Quality MHDDSA Services Work Group, in the Goal section, regarding the group’s focus. She also discussed the handout on *NC Commission of MHDDSA: Advisory Committee Decision Matrix, Criteria for Selection of Advocacy Issues*, and advised the Advisory Committee may want to consider helping the Rules Committee with their review of the rules as required by Session Law 2013-413. Session Law 2013-413 amended the NC Administrative Procedure Act by adding a new section which reviews all existing rules (NC General Statute 150B-21.3A). She also reviewed the handouts on the Continuum Array of Services within each disability group and disseminated copies of the proposed LME-MCOs maps. Ms. Cunningham noted the state is moving toward four (4) LME-MCOs and asked if there were changes to the document on the *Funnel Database for Advisory Matrix for NC Commission on MHDDSA*. Ms. Cunningham also welcomed Dr. Roger Moore as a new member of the Advisory Committee and introduced John Emerson as a new Commission member.

Approval of the Minutes:

Upon motion, second, and unanimous vote, the Advisory Committee approved the minutes of the October 24, 2013 meeting.

New Business:

At the request of Ms. Cunningham, Ms. Baker briefed the Advisory Committee on the process and role of the NC Commission for MH/DD/SAS (and Rules Committee) in response to the *Periodic Review and Termination of Existing Rules* as required by NC General Statute 150B-21.3A. She reviewed the Initial Determination Report, which was disseminated at the Rules Committee meeting, and advised the Advisory Committee she will provide them with electronic copies. Ms. Baker also referenced, and allowed the members the opportunity to review, the schedule proposed by the Department of Health and Human Services for Boards and Commissions under its purview. The Commission Leadership will discuss the role of the Advisory Committee in helping the Rules Committee with this task.

The comments below were made by Advisory Committee members:

- Dr. Olley asked the Advisory Committee to review rules to see if there are areas in which they want to be assigned or to provide names regarding other individuals who may be helpful.

- Beverly Morrow stated that, while she understood the need to assist with the rulemaking tasks, she does not want to see the progress the Advisory Committee and work groups have made be set aside.
- Dr. Spencer agreed with Ms. Cunningham's recommendation regarding assisting with the rulemaking process while having an Advisory Committee member assist with the process to help identify potential topics which could provide additional policy ideas for the members to address. However, she also agreed with Ms. Morrow's viewpoint regarding moving forward to continue to work on the issues identified and assigned to the Advisory Committee.
- Don Trobaugh stated he would prefer to see the rules review process begin, so the committees will know how to proceed.
- Mr. Owen commented that the Advisory Committee may need to assist the Rules Committee with this task or the committees may need to reorganize.

The Committee agreed to identify recommendations to give to the Full Commission. Ms. Baker's goal is to provide the Full Commission with a final rulemaking timeline approved by the RRC at the Commission's meeting on February 27, 2014. Logistics will be discussed at the next Commission Leadership meeting

Public Comment:

There were no public comments.

There being no further business, the meeting adjourned.